

| CLAIMS ONLY | | | | | | Application Number <i>09769576</i> | Filing Date <i>1-14-01</i> | |
|-----------------|----------|--------|-----------------------|--------|------------------------|---|-------------------------------|--------|
| | | | | | | Applicant(s) | | |
| | | | | | | * May be used for additional claims or amendments | | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | |
| | Indep | Depend | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total Indep | 2 | | | | | | | |
| Total Depend | 3 | ← | ← | ← | | | | |
| Total Claims | 5 | | | | | | | |
| Total Indep | | | | | | | | |
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| Total Claims | | | | | | | | |